

NATIONAL REGISTER OF HISTORIC PLACES
INVENTORY - NOMINATION FORM

MD. HISTORICAL TRUST
BOX 1704
ANNAPOLIS, MD. 21404

(Type all entries - complete applicable sections)

| | |
|------------------|------|
| STATE: | |
| COUNTY: | |
| FOR NPS USE ONLY | |
| ENTRY NUMBER | DATE |

| | |
|------------------|----------------------------|
| 1. NAME | |
| COMMON: | <i>Exequality Equality</i> |
| AND/OR HISTORIC: | |

| | | | |
|---|------|-------------------------|------|
| 2. LOCATION | | | |
| STREET AND NUMBER: <i>Corner Mt. Airy Rd + St. Rt 301 - SW</i> | | | |
| CITY OR TOWN: <i>Faulkner</i> | | | |
| STATE <i>Md.</i> | CODE | COUNTY: <i>Chas.</i> | CODE |

| | | | | |
|---|---|---|--|--|
| 3. CLASSIFICATION | | | | |
| CATEGORY (Check One) | OWNERSHIP | | STATUS | ACCESSIBLE TO THE PUBLIC |
| District <input type="checkbox"/> Building <input checked="" type="checkbox"/> Site <input type="checkbox"/> Structure <input type="checkbox"/> Object <input type="checkbox"/> | Public <input type="checkbox"/> Private <input checked="" type="checkbox"/> Both <input type="checkbox"/> | Public Acquisition: In Process <input type="checkbox"/> Being Considered <input type="checkbox"/> | Occupied <input checked="" type="checkbox"/> Unoccupied <input type="checkbox"/> Preservation work in progress <input type="checkbox"/> | Yes: Restricted <input type="checkbox"/> Unrestricted <input type="checkbox"/> No: <input type="checkbox"/> |
| PRESENT USE (Check One or More as Appropriate) | | | | |
| Agricultural <input type="checkbox"/> | Government <input type="checkbox"/> | Park <input type="checkbox"/> | Transportation <input type="checkbox"/> | Comments <input type="checkbox"/> |
| Commercial <input type="checkbox"/> | Industrial <input type="checkbox"/> | Private Residence <input checked="" type="checkbox"/> | Other (Specify) <input type="checkbox"/> | |
| Educational <input type="checkbox"/> | Military <input type="checkbox"/> | Religious <input type="checkbox"/> | | |
| Entertainment <input type="checkbox"/> | Museum <input type="checkbox"/> | Scientific <input type="checkbox"/> | | |

| | | | |
|---|----------------------|------|--|
| 4. OWNER OF PROPERTY | | | |
| OWNERS NAME: | | | |
| STREET AND NUMBER: | | | |
| CITY OR TOWN: <i>Equality Faulkner</i> | STATE: <i>Md.</i> | CODE | |

| | | | |
|--|----------------------|------|--|
| 5. LOCATION OF LEGAL DESCRIPTION | | | |
| COURTHOUSE REGISTRY OF DEEDS, ETC: <i>Chas. Co.</i> | | | |
| STREET AND NUMBER: | | | |
| CITY OR TOWN: <i>LaPlata</i> | STATE: <i>Md.</i> | CODE | |
| APPROXIMATE ACREAGE OF NOMINATED PROPERTY: | | | |

| | | | |
|--|--------|------|--|
| 6. REPRESENTATION IN EXISTING SURVEYS | | | |
| TITLE OF SURVEY: | | | |
| DATE OF SURVEY: Federal <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Local <input type="checkbox"/> | | | |
| DEPOSITORY FOR SURVEY RECORDS: | | | |
| STREET AND NUMBER: | | | |
| CITY OR TOWN: | STATE: | CODE | |

SEE INSTRUCTIONS

STATE:

COUNTY:

ENTRY NUMBER DATE

FOR NPS USE ONLY

7. DESCRIPTION

| | | | | | | |
|-----------|------------------------------------|--|-------------------------------|---|--------------------------------|------------------------------------|
| CONDITION | (Check One) | | | | | |
| | Excellent <input type="checkbox"/> | Good <input checked="" type="checkbox"/> | Fair <input type="checkbox"/> | Deteriorated <input type="checkbox"/> | Ruins <input type="checkbox"/> | Unexposed <input type="checkbox"/> |
| INTEGRITY | (Check One) | | | (Check One) | | |
| | Altered <input type="checkbox"/> | | | Unaltered <input checked="" type="checkbox"/> | | |
| | | | | Moved <input type="checkbox"/> | | |
| | | | | Original Site <input checked="" type="checkbox"/> | | |

DESCRIBE THE PRESENT AND ORIGINAL (If known) PHYSICAL APPEARANCE

2 storey + attic
 "A" roof = ridge running N to S.
 Orig. 2 chimneys ^{exterior} in gable end -
 NW chimney replaced by chimney
 stack * — both exterior.
 3 bays front - Door at SE end.
 Front faces E
 1 storey farm porch 1st level front.

NW chimney . . . by a single flue
 exterior store chimney.

SEE INSTRUCTIONS

8. SIGNIFICANCE

PERIOD (Check One or More as Appropriate)

Pre-Columbian ☐16th Century ☐18th Century ☒20th Century ☐15th Century ☐17th Century ☐19th Century ☐

SPECIFIC DATE(S) (If Applicable and Known)

AREAS OF SIGNIFICANCE (Check One or More as Appropriate)

Aboriginal ☐Education ☐Political ☐Urban Planning ☐Prehistoric ☐Engineering ☐

Religion/Phi-

Other (Specify) ☐Historic ☐Industry ☐lasaphy ☐Agriculture ☐Invention ☐Science ☐Art ☐Landscape ☐Sculpture ☐Commerce ☐Architecture ☐

Social/Human-

Communications ☐Literature ☐itarian ☐Conservation ☐Military ☐Theater ☐Music ☐Transportation ☐

STATEMENT OF SIGNIFICANCE (Include Personages, Dates, Events, Etc.)

Burial place of Samuel Hanson
 father of John Hanson - 1st. Pres. of
 U.S. in Congress Assembled (Articles
 of Confederation).

SEE INSTRUCTIONS

9. MAJOR BIBLIOGRAPHICAL REFERENCES

10. GEOGRAPHICAL DATA

| LATITUDE AND LONGITUDE COORDINATES DEFINING A RECTANGLE LOCATING THE PROPERTY | | | O R | LATITUDE AND LONGITUDE COORDINATES DEFINING THE CENTER POINT OF A PROPERTY OF LESS THAN ONE ACRE | | |
|--|-------------------------|-------------------------|--------|--|-------------------------|--|
| CORNER | LATITUDE | LONGITUDE | | LATITUDE | LONGITUDE | |
| | Degrees Minutes Seconds | Degrees Minutes Seconds | | Degrees Minutes Seconds | Degrees Minutes Seconds | |
| NW | 0 ' " | 0 ' " | | 0 ' " | 0 ' " | |
| NE | 0 ' " | 0 ' " | | | | |
| SE | 0 ' " | 0 ' " | | | | |
| SW | 0 ' " | 0 ' " | | | | |

LIST ALL STATES AND COUNTIES FOR PROPERTIES OVERLAPPING STATE OR COUNTY BOUNDARIES

| STATE: | CODE | COUNTY | CODE |
|--------|------|---------|------|
| | | | |
| STATE: | CODE | COUNTY: | CODE |
| | | | |
| STATE: | CODE | COUNTY: | CODE |
| | | | |
| STATE: | CODE | COUNTY: | CODE |
| | | | |

11. FORM PREPARED BY

| | | |
|--|-----------------------|------|
| NAME AND TITLE: <i>Richard Rivers</i> | | |
| ORGANIZATION: <i>M.H.T.</i> | DATE | |
| STREET AND NUMBER: | | |
| CITY OR TOWN: <i>Quincy</i> | STATE: <i>Ind.</i> | CODE |

12. STATE LIAISON OFFICER CERTIFICATION

NATIONAL REGISTER VERIFICATION

As the designated State Liaison Officer for the National Historic Preservation Act of 1966 (Public Law 89-665), I hereby nominate this property for inclusion in the National Register and certify that it has been evaluated according to the criteria and procedures set forth by the National Park Service. The recommended level of significance of this nomination is:

National ☐ State ☐ Local ☐

Name _____

Title _____

Date _____

I hereby certify that this property is included in the National Register.

Chief, Office of Archeology and Historic Preservation

Date _____

ATTEST:

Keeper of The National Register

Date _____

SEE INSTRUCTIONS